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|             |                            | EXAMINER<br>T. H. C. /      |

APPLICANTS

76s n/a

N/A n/a

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|---|---|---|-------------------|------------------|---------------|--------------|---------------|---------------------|-----------------------|
| Foreign priority claimed<br>35 USC 119 conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | AS FILED <b>→</b> | STATE OR COUNTRY | Sheets DRWGS. | TOTAL CLAIMS | INDEF. CLAIMS | FILING FEE RECEIVED | ATTORNEY'S DOCKET NO. |
| Verified and Acknowledged                             |   | Examiner's initials<br>T. H. C.                                     |                   |                  |               |              |               |                     |                       |
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